

# E-PREVENTION

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**E-PREVENTION** 

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## Club Drugs...They're Nothing to Rave About

MDMA (Ecstasy), GHB, Rohypnol, Ketamine, Methamphetamine, and LSD are extremely dangerous drugs with unpredictable psychedelic and stimulant properties. Often ingested at allnight dance parties known as raves, these drugs have been categorized as Club Drugs. Civilian research shows that the use of club drugs, primarily Ecstasy, is increasing at an alarming rate. According to the survey, ten percent of all teens have tried Ecstasy, double the amount documented in 1995. In addition, thirty-two percent of the nations' teenagers stated that they had a close friend that had tried the drug, up six percent from 1999.

The Army, to include the Active Component, Army Reserve, and National Guard has tested all specimens collected for urinalysis drug testing for the club drug Ecstasy since FY 1996. The total number of specimens tested

over the past four fiscal years has remained relatively constant. There has been an increase in the total number of specimens and soldiers testing positive from FY 1999 to FY 2000. However, the most dramatic increase within a drug class has been for the club drug Ecstasy.

As the United States Army's lead agency for substance abuse prevention and education, ACSAP has developed a Club Drugs Awareness Initiative to address the need for resources to prevent and education soldiers about these drugs. With the slogan "Club Drugs...They're Nothing to Rave About", ACSAP is providing installations and ASAPs with prevention and education products and services to assist in the education of our soldiers.

In conjunction with the Initiative, ACSAP has distributed posters, brochures, and educational tapes



"Club Drugs...They're Nothing to Rave About" is one of the posters that was distributed worldwide.

to installations worldwide. In addition to the products, several other resources such as information papers, and Power Point presentations have been made available on the ACSAP website (http://www.acsap.org).

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# Useful Prevention Websites

- ? ACSAP http://www.acsap.org
- ? National Institute on Drug Abuse - http://www.nidanih.org
- ? Office of National Drug Control Policy http://www.whitehousedrugpo licy.gov

# ACSAP Annual Conference

The ASAP Workshop is 7-9 August 2002, in Colorado Springs, Colorado. Our workshop theme is "Serving Soldiers". Annually, our workshop is done in conjunction with the Institute for Integral Development.

This year we celebrate the 30<sup>th</sup> anniversary of ASAP. In June



Colorado Springs, CO

1971, President Nixon issued an Executive Order that declared a national counteroffensive against drug abuse. In response to the Executive Order public law 92-129 on 28 September 1971, mandated a program for the identification and treatment of drug and alcohol dependent persons in the Armed Forces. The Army instituted AR 600-85 as guidance. The ASAP program has evolved considerably since the 1971 public law order, for example, we have expanded the drug-testing program from military to civilian testing, modernized the Prevention Education Program, and established an Employee Assistance Program. The workshop agenda will focus

on the following: Prevention Education Branch Program update, Award Presentations for 20 and 30 years of service with ASAP, the Secretary of Defense Community Drug Awareness Award nominees, the 2002 Fulcrum Shield Youth Award nominees, Army Drug Testing Program update, Military Drug Testing, Civilian Drug Testing Program overview, Civilian DFW Drug Testing, and DOT Drug Testing Program update. There will be a special training on Friday 9 April 2002 for those who have interest in preparing for the CEAP exam. For more detailed information about this workshop go to http://www.acsap-army. orq.

#### **Additional Information**

We at ACSAP are always searching for new and innovative prevention and training ideas. If you have come across, or created anything that you believe would be useful for the rest of the U.S. Army Prevention field, or if you would like to see something in next months issue of E-Prevention please contact Josh Myerson at DSN: 761-0667 or via email at myersonj@usadaoa-emh1.army. mil

#### **E-PREVENTION**



### **Directors Corner**

We at ACSAP are very excited about the E-PREVENTION newsletter. The newsletter is another way that we are trying to provide the field with new and interesting information regarding substance abuse prevention on a quarterly basis.

The newsletter allows us at ACSAP to let you know what we are working on, what special events are coming up, and it gives us an excellent way to provide you with information that will help prevent the abuse of alcohol and use of other drugs on your installations.

This issue of E-PREVENTION high-

lights on materials that have recently been distributed world wide such as "Dancing With Darkness", and social marketing posters. In addition to this, we are also introducing the "Drug of the Month" column. This column will be utilized to briefly highlight a new drug in each issue. This month we've decided to highlight inhalants as inhalant use is an ongoing problem. Inhalants are an extremely dangerous drug and are easily obtained. Because of this we urge you to read the column, visit our website, and visit www.inhalants.org to obtain additional information.

As many of you observed in Colorado Springs over the summer the Army is currently enacting the Well-Being Strategic Plan. Because of this, Well-Being is quickly becoming extremely important throughout the Army. Members of ACSAP had the opportunity to speak with BG James Coggin, Director of Human Resources Policy. General Coggin is responsible for several areas including leadership, uniform requirements, housing, and EEO. In addition to these responsibilities he is also tasked

with the enormous task of making the Well-Being Strategic Plan a reality. I hope you will find the interview informative and we urge you to access more information at http://www.odcsper.army.mil/.

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### DEA Video: "Dancing With Darkness"

Due to the rise in Ecstasy and Club Drug use the Drug Enforcement Agency produced "Dancing With Darkness", an information video dealing with raves and club drugs.

The video combines old and new video as the DEA combines scare tactics used in the forties and fifties with the modern tactic of providing the viewer with useful information.

ACSAP has reproduced the video and distributed it to all installations worldwide. If there are any questions regarding the distribution, viewing, or material of the tape please contact Josh Myerson at DSN: 761-0667 or via email at josh. myerson@usadaoa-emh1.army.mil



Rave Invitation

## Army Well-Being and the Army Substance Abuse Program

BG James A. Coggin, Director, Human Resources Policy Directorate, G-1, HQDA, was interviewed to assist in providing information for the publication of this article.

The United States Army has traditionally gone through great lengths in order to take care of the mental, spiritual and physical readiness of its soldiers.

Over the last few years a transformation of the Army has been initiated, to include the readiness of the soldiers. The human dimension of this transformation is Army Well-Being.

The goal is to create a framework that "encompasses and expands upon the Quality of Life successes by providing a standardized, integrated holistic approach to programs at the Soldier, community/installation, and senior leadership level," said Brig. Gen. Jim A. Coggin, director human resources policy, Headquarters Department of the Army G-1.

The goals of Army Well-Being are to improve the ability of an everyday soldier to live, to connect, and to grow. The underlying philosophy of Well-Being is to improve upon services to the soldier (Active, National Guard, and



BG James Coggin

Reserve), retirees, veterans, Department of Army civilians, and their families. The individual with the support of their family will be more prepared to perform and support the Army and the country.

Although Army Well-Being will be implemented at the installation and community level, the objective of Army Well-Being is not to eliminate or change services and programs that are currently provided.

The Army recognizes that the programs at the installation level are worthwhile and accomplish individual objectives. Army Well-Being simply wants the services on the installation level to combine forces to "ensure goals and objectives are integrated to provide the best possible services to our people," said Coggin.

To guarantee that Army Well-Being is integrated seamlessly and that it embraces the best services, a "Laboratory Concept Plan" will be implemented at Fort Bragg, N.C., Fort Jackson, S.C., Aberdeen Proving Ground, Md., 1st Area Support Group in Korea, and the 26th Area Support Group in Heidelberg, Germany, beginning 1 June and lasting an entire year.

The purpose of the Laboratory Concept Plan is to "gain a common understanding and appreciation of Army Well-Being and its application at the community level." It is believed that the laboratory sites will provide the Army with a better sense of the ability and commitment of "installation staffs and service providers to refocus their programs to Well-Being goals, objectives, and standards," said Coggin.

(Continued on page 4)



# **Drug of the Month: Inhalants**

#### DRUG OF THE MONTH:

In each issue of E-PREVENTION a different drug of abuse will be highlighted. We at ACSAP strive to provide members of the field with the most up-to-date information on drugs of abuse new and old.

#### WHAT ARE INHALANTS?

Inhalants are breathable chemical vapors, often from household products, that produce mind altering effects. Inhalants use is a growing problem in the United States because they are readily available, inexpensive, and can be found almost anywhere.

Inhalants can be split into three categories: Solvents, Anesthetics, and Nitrites. Most solvents can be found in household products and include adhesives, aerosols, cleaning agents, food products and gases. Anesthetics have historically been the most well known inhalants as nitrous oxide, ether, and chloroform belong to this family. Nitrites are the least known inhalants and contain drugs such as Amyl and Butyl.

# HOW ARE INHALANTS INGESTED?

Inhalants are ingested into the body by breathing in the vapors of the product. Several methods of inhalation are used by the abusers. This is also known as "huffing".

Zippers, with 12% alcohol, come in bright colors and fruity flavors and have packaging that resembles popular gelatin snacks, such as prepackaged Jell-o. There's a new front in the fight to keep alcohol away from kids: school lunch boxes.

The popularity of Zippers is rising, packaged cups of fruity-flavored gelatin and alcohol. Zippers are marketed by a small Ohio based company as the first commercially produced version of "Jell-O shots," that sweet, chilled concoctions that have long been a staple at beach bars and college parties.

But Zippers, with their bright colors and cheery labels, also look like the gelatin dessert packs that thousands of youths take to school each day. And drug-prevention officials are hearing complaints from parents and



Examples of products that are often "huffed".

Use of a Bag - The bag is filled with the fumes and the user breathes air from the bag. Sometimes the user will put their entire head into the bag in order to achieve "more of a high".

Use of a Rag - The rag is soaked in

the product and the user presses the rag over his/her mouth and nose while breathing.

Pressurized Containers - Some abusers will inhale the product/gas directly from the container. This is done as there is no need for addi-

tional paraphernalia.

# WHAT ARE THE SIDE EFFECTS OF INHALANT ABUSE?

Inhalants abuse can cause serious and long term damage to the human body. Some of the more serious damage that can done are: hearing loss, body tremors, liver damage, kidney damage, bone marrow damage, paralysis, brain damage, or even sudden sniffing death.

Brain Damage - Inhalants abuse causes a variety of serious sensory and psychological disorders.

Cerebral Cortex - Inhalant abuse causes personality changes, memory loss, hallucinations, and learning disabilities.

Cerebellum - Inhalant abuse causes loss of coordination, slurred speech, chronic tremors, and uncontrollable shaking.

*Ophthalmic Nerve* - Inhalant abuse can cause serious sight disorders, including blindness.

#### WHAT IS SUDDEN SNIFF-ING DEATH?

Sudden Sniffing Death means that the user can die the 1st, 10th, or 100th time he or she uses an inhalant

# WHERE CAN I FIND MORE INFORMATION?

More information on inhalants can be found at http://www.acsap.org.

## **Zipper Shots**

school administrators that Zippers make it too easy for youths to sneak alcohol into school.

"Zippers may be dangerous because the come packaged in containers that look like any other snack pack or after-school snack a child may put in their lunch box," the Community Anti-Drug Coalitions of America (CADCA) says. The coalition adds that "Zippers are being marketed in ways that appeal to an underage audience."

Zippers, which unlike regular gelatin snack packs require refrigeration, are sold in bars, liquor stores, and groceries in 26 states. There is a cherry, bourbon and lime, orange, and lemon flavors.

Eight-packs retail for \$6.99 to \$8.99, depending on the market and

local taxes. Each gelatin cup contains 12% alcohol and has about the same potency as a glass of wine.

Hope Taft, the wife of Ohio Gov. Bob Taft, is among those speaking out against Zippers. She says parents in her state have been calling a drugprevention resource center in Cincinnati about Zippers. "Products like these and wine coolers...cause us great concern because they are very appealing to young people," says Taft, the mother of a college senior. "They all have colorful, creative labeling and catchy names. The package is sort of disquised."

Lily Heil, 12, a 7th grade student, agrees that kids at school could easily pass off zippers as regular gelatin snack packs. "Once you rip off the lid that says it has alcohol," she says, "it looks just like Jell-O.



Zipper Shots

#### **E-PREVENTION**



Thus far, Well-Being has identified 49 major functions of Army programs and categorized these functions into 14 categories all linked to the three major goals of to live, to connect and to grow. Within these functions, working closely with program proponents, Well-Being identifies near, mid and long-term goals and objectives. Well-Being ensures these goals and objectives are integrated and incorporated into the Army Transformation Campaign Plan.

Well-Being at the HQDA level promotes a philosophy of integration among proponents and Army program service providers. Well-Being combines both qualitative and quantitative data on these programs and then aligns them into the three goals, which allows the senior leadership to gain a better perspective of how the various interrelated programs are affecting the overall Well-Being of the force and the different constituent groups.

The Laboratory Concept plan seeks to replicate this same philosophy at the Major Command, Division and community/installation levels.

"Well-Being is a smarter way of doing business. It ensures we are maintaining an effective worklife balance among our force," said Coggin.

Well-Being also divides the various interrelated Army programs into seven distinct lines of operation: Command programs, pay and compensation, health care, housing and workplace environment, education, family programs and morale, welfare and recreation.

The Army Center for Substance Abuse Program (ACSAP) is located within the command programs line of operation one and is primarily listed under the function of risk reduction. Working with the ACSAP proponent, Well-Being has divided the objectives of this program into three areas: Near-term (FY03), Mid-term (FY10), and Long-term (FY14).

According to Coggin, being a part of Well-Being, the ASAP and its clients benefit from the holistic approach of Well-Being, because the program proponent is better able to see what the rest of the Army is doing with other programs related to ACSAP from HQDA level all the way down to community/installation level. According to the Well-Being Action Plan all Army installations and communities will, by the end of FY03, implement programs that "encourage and support various life coping skills and programs" such as: alcohol abuse prevention, drug abuse prevention, stress reduction, financial management, and relationship building.

Once these programs are implemented, the objectives within the Well-Being Action Plan state that these ACSAP programs are to be made readily available to all members of the local community, including: soldiers, family members and DA civilians.

While building upon the current objectives and programs, ACSAP will also introduce several new programs that will help identify and rehabilitate at risk and high-risk soldiers.

The first of these programs is an online background check capability. This capability will give local commanders easy access to information that will help identify at risk soldiers that need additional guidance and/or counseling. Because this program may cause an increase in the number of soldiers that require assistance, the Army Well Being initiative plans to increase the counseling capacity on the installation level to match increased referrals by the end of fiscal year 2004.

While the identification of current soldiers that are high risk is important to the Army, ACSAP also believes that the identification of those newly enlisted soldiers that are at risk is just as important. The identification of these soldiers will be accomplished through the introduction of an Initial Entry Training Identification-Remediation Pilot Program. It is believed that by identifying and counseling at risk soldiers at such an early stage, there will be fewer incidents later in the soldiers'

While targeting at risk soldiers is a goal of Army Well-Being, the initiative also intends to show all members of the Army community that high-risk behaviors are not something all soldiers participate in. ACSAP will deploy a Social Norms Campaign by the end of fiscal year 2003 to document and promote healthy behaviors or the "Social Norm."

The ACSAP leadership trusts that the long term goal of reducing the number of incidence of self and officially reported soldier and family member high-risk behaviors by 50 percent by the end of fiscal year 2014 is obtainable through encouraging the soldier to live by implementing a competitive standard of living for all soldiers, veterans, DA civilians, and their families; to connect by implementing a unique culture, sense of community and a record of accomplishment that engenders intense pride and a sense of belonging amongst soldiers, veterans, DA civilians and their families; and to grow by providing an environment that allows soldiers, civilians, retirees, veterans, and their families to enrich their personal life by achieving their individual aspirations.

Recognizing that soldiers, DA civilians and their families benefit from ACSAP, now with its integration into the Well-Being philosophy, other program proponents that may work with the same constituent group dealing with substance abuse, such as Health care, Army Community Services, and the Chaplain corps can tailor their programs objectives both short-term and long-term to be in synchronization with ACSAP. Army leadership that is responsible for resourcing can use the Well-Being philosophy to ensure programs are meeting the needs of the Army's people through the three major goals of to live, to connect and to grow.

"Well-Being is not the proponent or manager of the various programs, but rather brings all of them together to ensure consistency and effective delivery of these programs, which in turn leads to better services and programs for our soldiers (Active, National Guard, Reserve), DA civilians, veterans, retirees and their family members," said Coggin.

### **New Unit Prevention Leader** Certification Training Program

ACSAP has developed a new Unit Prevention Leader Certification Training Program (UPL CTP) to meet the regulatory requirements to train, certify, and re-certify UPLs. All installations should have received a demo copy of the UPL CTP CD-Rom and can order additional copies on the ACSAP website (www.acsap-army.org). At a minimum, each ASAP must order enough copies of the CD for each unit they service to receive a copy, and one master copy to be kept at the ASAP. Please be advised that all current UPLs and future UPLs will be trained using the material contain within the ACSAP UPL CTP, additional material may be added. but material contained within the CD CANNOT be substituted for or removed. The POC for the UPL CTP is Mr. Michael Biggerstaff, he can be reached at DSN 761-5575 or via email at

michael.biggerstaff@usadaoa-emh.army.mil.

#### Did You Know?

Did you know that the term "Binge Drinking" has different definitions depending on where you live:

- ? Sweden defines Binge Drinking as the consumption of half a bottle of spirits or two bottles of wine on the same occasion.
- ? In the United Kingdom it is defined as the consumption of eleven or more drinks on one occasion.
- ? In Italy the consumption of eight drinks a day is considered a normal drinking habit - not Binge Drinking.
- ? In the United States Binge Drinking is defined as the consumption of five or more drinks on an occasion (which can be an entire day).

#### REMINDER

Please remember to update all contact information on a quarterly basis. Your contact information is vital in order for ACSAP to distribute new and valuable information and training resources. Contact information can be updated on the ACSAP Public Website (www.acsap.org) or by contacting Mr. Josh Myerson at DSN 761-0667, FAX 761-6575 or via